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PTO/SB/05 (12/97)

OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new non-provisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No.	MS-02/3/US	Total Pages	26
	First Named Inventor or Application Identifier			
	Forbes, E. I.			
	Express Mail Label No.	ET515876870US		

03914 U.S. PTO
 10/633172
 08/04/03

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>		ADDRESS TO: Commissioner for Patents Mail Stop Patent Application P.O. Box 1450 Alexandria, VA 22313-1450	
1. <input checked="" type="checkbox"/> Fee Transmittal Form <small>(Submit an original, and a duplicate for fee processing)</small> 2. <input checked="" type="checkbox"/> Specification [Total Pages 26] <small>(preferred arrangement set forth below)</small> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D Invention - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets 5] 4. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages 2] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 17 completed)</small> <small>[Note Box 5 below]</small> <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.		6. <input type="checkbox"/> Microfiche Computer Program (Appendix) 7. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies Accompanying Application Parts 8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small> 10. <input type="checkbox"/> English Translation Document (if applicable) 11. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 12. <input checked="" type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(should be specifically itemized)</small> 14. <input checked="" type="checkbox"/> Small Entity <input type="checkbox"/> Statement filed in prior application, Status still proper and desired 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small> 16. <input type="checkbox"/> Other	
17. If a CONTINUING APPLICATION , check appropriate box and supply the requisite information: <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: 09/841,377			
18. CORRESPONDENCE ADDRESS <input type="checkbox"/> Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or <input checked="" type="checkbox"/> New correspondence address below			
NAME	James C. Forbes		
ADDRESS	1625 Glenview Road, #206		
CITY	Glenvi w	STATE	IL
		ZIP CODE	60025
COUNTRY	U.S.A.	TELEPHONE	847-998-0324
		FAX	

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15750 U.S. PTO
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PTO/SB/17 (10/96)

OMB 0651-0032

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FEE TRANSMITTAL		Complete if Known	
		Application Number	To be assigned
		Filing Date	August 4, 2003
		First Named Inventor	Forbes, E. I.
		Group Art Unit	3712
		Examiner Name	To be assigned
TOTAL AMOUNT OF PAYMENT	(\$) 375	Attorney Docket Number	MS-02/3/US

METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)																																																																																																																																																																															
1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account Number _____ Deposit Account Name _____ <input type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance, 37 CFR 1.31(b)		3. ADDITIONAL FEES <table border="1"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td>_____</td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing or cover sheet</td><td>_____</td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td>_____</td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for reexamination</td><td>_____</td></tr> <tr><td>112</td><td>920</td><td>112</td><td>920</td><td>Requesting publication of SIR prior to Examiner action</td><td>_____</td></tr> <tr><td>113</td><td>1,840</td><td>113</td><td>1,840</td><td>Requesting publication of SIR after Examiner action</td><td>_____</td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for response within first month</td><td>_____</td></tr> <tr><td>116</td><td>410</td><td>216</td><td>205</td><td>Extension for response within second month</td><td>_____</td></tr> <tr><td>117</td><td>930</td><td>217</td><td>465</td><td>Extension for response within third month</td><td>_____</td></tr> <tr><td>118</td><td>1,550</td><td>218</td><td>725</td><td>Extension for response within fourth month</td><td>_____</td></tr> <tr><td>119</td><td>310</td><td>219</td><td>155</td><td>Notice of Appeal</td><td>_____</td></tr> <tr><td>120</td><td>310</td><td>220</td><td>155</td><td>Filing a brief in support of an appeal</td><td>_____</td></tr> <tr><td>121</td><td>270</td><td>221</td><td>135</td><td>Request for oral hearing</td><td>_____</td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td>_____</td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive unavoidably abandoned application</td><td>_____</td></tr> <tr><td>141</td><td>1,320</td><td>241</td><td>660</td><td>Petition to revive unintentionally abandoned application</td><td>_____</td></tr> <tr><td>142</td><td>1,320</td><td>242</td><td>660</td><td>Utility issue fee (or reissue)</td><td>_____</td></tr> <tr><td>143</td><td>450</td><td>243</td><td>225</td><td>Design issue fee</td><td>_____</td></tr> <tr><td>144</td><td>670</td><td>244</td><td>335</td><td>Plant issue fee</td><td>_____</td></tr> <tr><td>122</td><td>130</td><td>122</td><td>130</td><td>Petitions to the Commissioner</td><td>_____</td></tr> <tr><td>123</td><td>50</td><td>123</td><td>50</td><td>Petitions related to provisional applications</td><td>_____</td></tr> <tr><td>126</td><td>240</td><td>126</td><td>240</td><td>Submission of Information Disclosure Stmt</td><td>_____</td></tr> <tr><td>581</td><td>40</td><td>581</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td>_____</td></tr> <tr><td>146</td><td>790</td><td>246</td><td>395</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td>_____</td></tr> <tr><td>149</td><td>790</td><td>249</td><td>395</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td>_____</td></tr> <tr><td colspan="5">Other fee (specify) _____</td><td>_____</td></tr> <tr><td colspan="5">Other fee (specify) _____</td><td>_____</td></tr> <tr><td colspan="5">SUBTOTAL (3)</td><td>(\$) _____</td></tr> </tbody> </table>		Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid	105	130	205	65	Surcharge - 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SUBMITTED BY		Complete (if applicable)	
Typed or Printed Name	James C. Forbes	Reg. Number	39,457
Signature	<i>James C Forbes</i>	Date	Aug 4, 2003
		Deposit Acct. User ID	